Conectiv Generator Interconnection Application -Short Form

(For Use with Generators 25 kW or Less)

An applicant (Generator Owner) makes application to Conectiv to install and operate a generating facility of 25kW or less interconnected with the Conectiv utility system.

Section 1, Applicant Information			
Name:			
Mailing Address:			
City:	State:	Zip Code:	
Facility Location (if different from above):			
Telephone (Daytime): Area Code Number	er (Eveni	ng) Area Code Number	
Conectiv Power Delivery Account No. :		Pole Number:	
Energy Service Provider Name:		Account No.:	
Section 2, Generator Technical Information			
Is Generator powered from a Renewable NEM Q	Qualifying Energy Source	ce: Yes No	
Type NEM Qualifying Energy Source (if application)	able): Solar	Wind Hydro	
Generator (or solar collector) Manufacturer, Mo	odel Name & Number:		
	Output Power I	Rating in kW:	
Inverter Manufacturer, Model Name & Number	(if used):		
	Rating in kW	÷	
Will a generator disconnect device, accessible to	Conectiv, be installed	?: Yes No	
If the Generator Owner elects not to install a Owner assumes all risks and consequences whereby also interrupting all utility electric ser	hen a service meter m	ust be "pulled" to disconnect the ger	
Section 3, Generator/Equipment Certification	<u>n</u>		
Generating systems that use utilize inverter tecl <i>UL 1741</i> . Generating systems that use a rota <i>Technical Considerations Covering Parallel Op and Interconnected with the Conectiv Power</i> certifies that the installed generating equipr supply documentation that confirms compliant	ating machine must be perations of Customer Control Delivery System document meets the appropriate the control of the control of the customer than the customer that the customer than the custo	compliant with Conectiv Power Del Owned Generation of Less than One (ment. By signing below, the App	ivery's 1) MW plicant
Signed (Applicant):		Date:	

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Section 4, Installation Details

Generating System will be installed b	y: Owner	State Licensed Electrician		
Installing Electrician:	Firm:	License No.:		
Mailing Address:				
City:	State:	Zip Code:		
Telephone: Area Code:	Number:			
Installation Date:	Interconnec	tion Date:		
Supply certification that the genera Building/Electrical code of the muni		d and inspected in compliance with the local		
Signed (Inspector):	f Inspector a convert the final inspecti	Date:on certificate may be attached)		
	i inspector, a copy of the final inspection	on certificate may be attached)		
Section 5, Applicant Signature				
	I also agree to install a V	nformation provided in the Interconnection Warning Label provided by Conectiv Power		
Signature of Applicant:		Date:		
Send the completed application to Co	onectiv Power Delivery Marketi	ng Department, Address, State, Zip.		
Section	s Below for Conectiv Power l	Delivery Use Only		
Section 6, Approval or Non-Approv	v <u>al</u>			
Conectiv Power Delivery: Has Approved Has Not Approved this Interconnection Application.				
Name : Date:				
Signature:		-		
Reason of Not Approving:				
	. Such approval does not imp	the minimum requirements for a safe proper ply that the Generator Owner's facility meets		
Section 7, Internal Notifications				
Send Applicant Warning Label for it Notify Billing Dept. of Interconnecte Notify District Engineering of Intercon Notify System Protection of Intercon	ed Generation: onnected Generation:	Yes Yes Yes Yes Yes		